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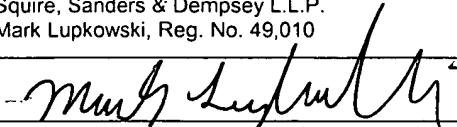
(to be used for all correspondence after initial filing)

		Application Number	10/662,223
		Filing Date	September 12, 2003
		First Named Inventor	Stephen D. Pacetti
		Group Art Unit	1734
		Examiner Name	Laura Estelle Edwards
Total Number of Pages in This Submission	17	Attorney Docket Number	50623.330

ENCLOSURES (check all that apply)

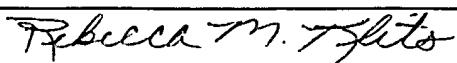
<input checked="" type="checkbox"/> Deposit Account 07-1850 Authorization <input checked="" type="checkbox"/> Postage Paid Return Postcard <input checked="" type="checkbox"/> Response to Office Action (14 pages) <input checked="" type="checkbox"/> Amendment Transmittal Letter (1 page) (in duplicate) <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Petition for Extension of Time (months) <input type="checkbox"/> Information Disclosure Statement (in duplicate) with Form PTO-1449 citing References <input checked="" type="checkbox"/> Express Mail Label No. EV 721161515 US <input checked="" type="checkbox"/> Certificate of Mailing <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) Formal ___ Sheets with Submission of Formal Drawings <input type="checkbox"/> Issue Fee Transmittal with PTO-85b (in duplicate) <input type="checkbox"/> Request for Continued Examination Transmittal (RCE) <input type="checkbox"/> Fee Transmittal Form, in duplicate <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Statement of Common Ownership <input type="checkbox"/> CD, Number of CD(s) ___	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Request for Status of Application <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

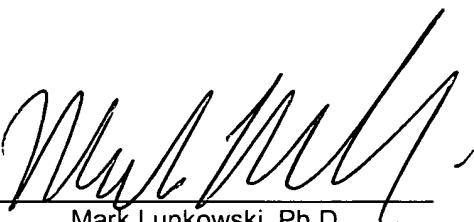
Firm or Individual name	Squire, Sanders & Dempsey L.L.P. Mark Lupkowski, Reg. No. 49,010
Signature	
Date	December 5, 2006

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date below:

Typed or printed name	Rebecca M. Klits		
Signature		Date	December 5, 2006



AMENDMENT TRANSMITTAL LETTER				Docket No. 50623.330
Applicant(s): Stephen D. Pacetti et al.				
Serial No. 10/662,223	Filing Date September 12, 2003	Examiner Laura Estelle Edwards	Group Art Unit 1734	
Invention: A Stent Mounting Device				
TO THE COMMISSIONER FOR PATENTS:				
Transmitted herewith is an amendment in the above-identified application.				
The fee has been calculated and is transmitted as show below.				
CLAIMS AS AMENDED				
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE
TOTAL CLAIMS	14	20	0	X \$50.00
INDEP. CLAIMS	4	6	0	X \$200.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				\$00.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				\$00.00
<p><input checked="" type="checkbox"/> No additional fee is required for amendment.</p> <p><input type="checkbox"/> Please charge Deposit Account No. 07-1850 in the amount of \$ A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of any necessary fees associated with this communication or credit any overpayment to Deposit Account No. 07-1850. A duplicate copy of this sheet is enclosed.</p> <p><input type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</p> <p><input type="checkbox"/> Any patent application processing fees under 37 C.F.R. 1.17.</p>				
<p>Dated: December 5, 2006</p> <p>Squire, Sanders & Dempsey L.L.P.</p> <p>1 Maritime Plaza, Suite 300</p> <p>San Francisco, CA 94111</p> <p>(415) 954-0200</p> <p>cc: Docket:</p>				
 <p>Mark Lupkowski, Ph.D. Reg. No. 49,010</p>				

Application No. 10/662,223

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Examiner: Laura Estelle Edwards

Stephen D. Pacetti et al.

Serial No.: 10/662,223 Art Unit: 1734

Filed: September 12, 2003

Title: A Stent Mounting Device

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RESPONSE TO OFFICE ACTION

Dear Examiner Edwards:

This is a Response to the Office Action mailed on September 14, 2006, which has a shortened statutory period to reply that ends on December 14, 2006.

The Listing of Claims begins at page 2.

Remarks begin at page 5.